## FOR INSTRUCTIONS, SEE BACK OF FORM

| DISCLOSURE SUMMARY  | PAGE   | DR-2<br>(Rev. 12/2005)                     | DISCLOSURE<br>REPORT |
|---|--|--|----------------------|
| COMMITTEE NAME (Must be same as on Statement of   | Organization)  |  |                      |
| Lyness for County Attorney  |  | For Office Use Or                          | 1877                 |
| IMPORTANT: Indicate by # type of committee you are reporting (1) Statewide/Legislative/Judge Standing for Retention Candida (4) County Central Committee (5) County Candidate (6) City Subdivision Candidate (8) County PAC (9) City PAC (10) State (11) Local Ballot Issue | ate (2)State PAC (3)State Party Candidate (7)School Board or Other Political | Logged In S C Scanned S C Computer Audited |                      |
| CANDIDATE COMMITTEES ONLY:  |  |  |                      |
| Candidate Name<br>Janet Lyness  | Political Party (if applicable) Democrat                                     |  | • :                  |
| Office Sought County Attorney   | District (if Senate or House)  |  |                      |
|   |  |  |                      |

Late reports are subject to possible civil and criminal penalties. Pursuant to lowa Code section 68B.32A(7) the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

| Roberson Filing Report  | 3 19 -354<br>TELEPHONE           | 4-7163 1-10-2011<br>DATE SIGNED                                   |
|---|----------------------------------|---|
| I AM FILING A January 19, 2011 (report date)  | REPORT FOR (1) ELECTION Indicate | ON /(2)NON-ELECTION YEAR.<br>by # 1 -                             |
| CHECK IF AMENDMENT TO REPORT DATED  Check if this is final (termination) report and attach in (You must continue to file reports until a DR-3 | Notice of Dissolution Form DR-3. | County & Local Committees, enter County in which Election is held |

## STATEMENT OF CASH ON HAND CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end 1,399.04 ADD TOTAL MONEY TAKEN IN THIS PERIOD 0.12 Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below),..... Schedule F: Loans Received total (Attach Schedule F) Schedule H: Total Sales of Campaign Property (Attach Schedule H)....... (Schedule H applies to Candidates' Committees Only) 1,399.16 SUB-TOTAL .....\$ SUBTRACT TOTAL MONEY SPENT THIS PERIOD 0.00 Schedule B: Expenditures total (Attach Schedule B) ("also see debts and loans below) ............ Schedule F: Loan Repayments total (Attach Schedule F)..... CASH ON HAND at the end of this reporting period (if final report balance must 1,399.16 be zero) (Attach DR-3) .....\$ 0.00 →UNPAID BILLS (From Schedule D - Attach Schedule D)......\$ 4,184.06 \*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F).......................\$ YES 🗸 NO CONSULTANT BREAKDOWN (Schedule G Attached?) CANDIDATE COMMITTEES ONLY: 0.00 VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

| For Instructions, See Back of Form  | Reset Form | SCHEDULE<br>A | MONETARY       |
|---|------------|---------------|----------------|
| CONTRIBUTIONS MONEY TAKEN IN  |            | (Rev. 07/03)  | RECEIPTS       |
| (Including candidate's personal funds)  COMMITTEE NAME (Must be same as on Statement of Organization) |            |               | CK THIS BOX IF |
| Lymess for County Attorney  |            | MILI          |                |

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**CAUTION:** Section 68B.32A(6), lowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

| DATE<br>RECEIVED<br>(MM/DD/YR) | PAC ID NUMBER<br>(If applicable)<br>AND PAC CHECK<br>NUMBER | NAME AND ADDRESS OF CONTRIBUTOR | RELATIONSHIP<br>TO CANDIDATE*<br>(if applicable) | AMOUNT<br>RECEIVED | √ IF FOR<br>FUND-<br>RAISER<br>INCOME |
|--------------------------------|---|---------------------------------|--|--------------------|---------------------------------------|
| 11-07-2010                     | CK#   | Interest from Bank              |  | \$00.06            |                                       |
| 12-06-2010                     | ID#   | Interest from Bank              |  | 00.06              |                                       |
|                                | ID#<br>CK#  |                                 |  |                    |                                       |
| •                              | ID#<br>CK#  |                                 |  |                    |                                       |
|                                |   |                                 | SUB-TOTAL  | s <sup>0.12</sup>  |                                       |

TOTAL (if last page of this schedule)
of any relative making a contribution to the

Page 1 of 1 (for Schedule A)

0.12

<sup>&</sup>quot;Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguintly (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

| FOR INSTRUCTIONS, SEE BACK OF FORM  | SCHEDULE                        |
|---|---------------------------------|
| COMMITTEE NAME (Must be same as on Statement of Organization)  Lyness for County Attorney | (Rev. 08/97) CONTRIBUTIONS      |
| Reset Form  | CHECK THIS BOX IF AMENDING FORM |

| DATE<br>RECEIVED<br>(MM/DD/YR) | NAME AND ADDRESS<br>OF CONTRIBUTOR                          | RELATIONSHIP<br>TO CANDIDATE<br>* (if applicable) | DESCRIPTION OF IN KIND CONTRIBUTION       | ESTIMATED<br>FAIR MARKET<br>VALUE | √ IF FOR<br>FUND-RAISER<br>CONTRIBUTION |
|--------------------------------|---|---|---|-----------------------------------|---|
| 04/04/06                       | Janet Lyncss<br>P.O. Box 267<br>lowa City, 1A 52244         |   | postage on<br>business reply<br>envelones | \$ 100.00                         |   |
| 05/10/06                       | Janet Lyness P.O. Box 267 Iowa City, IA 52244               |   | OnMedia TV ads                            | 4,083.00                          |   |
| 10/16/2010                     | Rebecca Reiter<br>265 Highland Drive<br>Iowa City, IA 52246 |   | Fax DR-2                                  | 1.06                              |   |
|                                |   |   |   |                                   |   |
|                                |   |   |   |                                   |   |
|                                |   |   |   |                                   |   |
|                                |   |   |   |                                   |   |
|                                |   |   |   |                                   |   |
|                                |   |   |   |                                   |   |
|                                |   |   |   |                                   |   |
|                                |   |   | SUB-TOTAL                                 | \$<br>4,184.06                    |   |
|                                |   |   | TOTAL (if last                            | S                                 |   |
|                                |   |   | page of this<br>schedule)                 | 4,184.06                          | 3 - <sup>3</sup>                        |

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page [ of ] (for Schedule E)